

16569 U.S. PTO  
040204

PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|---|------------------------|---|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No.    | 08211/0200652-US0/P05794                      |
|   | First Inventor         | Jonathan Knight                               |
|   | Title                  | APPARATUS AND METHOD FOR CURRENT SINK CIRCUIT |
|   | Express Mail Label No. | EV398894768US                                 |

2387 U.S. PTO  
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|---|---|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents. | MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |
|---|---|

|  |   |
|--|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification [Total Pages <b>12</b> ]<br><i>(preferred arrangement set forth below)</i><br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table,<br>or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>6</b> ]<br>5. Oath or Declaration [Total Sheets <b>4</b> ]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i><br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting inventor(s)<br>named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program <i>(Appendix)</i><br>8. Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i><br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies |
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**ACCOMPANYING APPLICATION PARTS**

- |   |  |
|---|--|
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))  |  |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br><i>(when there is an assignee)</i>                      |  |
| 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>  |  |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations                               |  |
| 13. <input type="checkbox"/> Preliminary Amendment  |  |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i>                                      |  |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i>  |  |
| 16. <input checked="" type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent. |  |
| 17. <input checked="" type="checkbox"/> Other: Certificate of Express Mailing Check   |  |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
 Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

|  |                                      |                                   |   |
|--|--------------------------------------|-----------------------------------|---|
| <input checked="" type="checkbox"/> Customer Number: | <b>38845</b>                         | OR                                | <input type="checkbox"/> Correspondence address below |
| Name   | DARBY & DARBY P.C.<br>John W. Branch |                                   |   |
| Address  | P.O. Box 5257                        |                                   |   |
| City   | New York                             | State                             | NY  |
| Zip Code   | 10150-5257                           |                                   |   |
| Country  | US                                   | Telephone                         | (206) 262-8900  |
| Fax  | (212) 753-6237                       |                                   |   |
| Name (Print/Type)                                    | John W. Branch                       | Registration No. (Attorney/Agent) | 41,633  |
| Signature  | Date                                 |                                   | April 2, 2004   |

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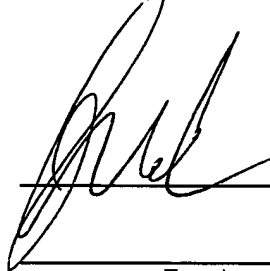
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 0;">Effective 10/01/2003, Patent fees are subject to annual revision.</p>  |          | <b>Complete if Known</b> |                          |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|--|----------|--------------------------|--------------------------|--|--------------------------------|--------------|--|-----------------|----------|----------|----------|----------|----------|------|------|------|------------------------|-------------------------------------|--------|------|-----|-----------------------------------|------|--|------|------|---------------------------------------|------|-----|---------------------------|----|--|-------|------|-------|--|--|--------------------------|------|------|------|--|--|--------------------------|--------|------|--------|---|--------|------|-----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-------|------|-----|---|--|------|-------|------|-------|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|-------|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|--|--------------------------------|
| <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div style="display: flex; justify-content: space-between;"><div><b>TOTAL AMOUNT OF PAYMENT</b></div><div><b>(\$)</b> 828.00</div></div>  |          | Application Number       | Not Yet Assigned         |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|  |          | Filing Date              | Concurrently Herewith    |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|  |          | First Named Inventor     | Jonathan Knight          |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|  |          | Examiner Name            | Not Yet Assigned         |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|  |          | Art Unit                 | N/A                      |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
|  |          | Attorney Docket No.      | 08211/0200652-US0/P05794 |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| <div style="display: flex;"><div style="flex: 1;"><b>METHOD OF PAYMENT</b> (check all that apply)<div style="margin-top: 5px;"><input checked="" type="checkbox"/> Check   <input type="checkbox"/> Credit Card   <input type="checkbox"/> Money Order   <input type="checkbox"/> Other   <input type="checkbox"/> None</div><div style="margin-top: 5px;"><input type="checkbox"/> Deposit Account:<br/>Deposit Account Number: <div style="border: 1px solid black; padding: 2px 20px; display: inline-block;">04-0100</div><br/>Deposit Account Name: <div style="border: 1px solid black; padding: 2px 40px; display: inline-block;">Darby &amp; Darby P.C.</div></div><div style="margin-top: 5px;">The Director is authorized to: (check all that apply)<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div><div><input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)</div><div><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div></div></div><div style="flex: 1;"><b>3. ADDITIONAL FEES</b><table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr><tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr><tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr><tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr><tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr><tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr><tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr><tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr><tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr><tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37CFR 1.129(b))</td><td></td></tr><tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr><tr><td colspan="6">Other fee (specify) _____</td></tr><tr><td colspan="5" style="text-align: right;">*Reduced by Basic Filing Fee Paid</td><td><b>SUBTOTAL (3) (\$)</b> 40.00</td></tr></tbody></table></div></div> |          |                          |                          | Large Entity   |                                | Small Entity |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130  | 2051 | 65                     | Surcharge - late filing fee or oath |        | 1052 | 50  | 2052                              | 25   | Surcharge - late provisional filing fee or cover sheet |      | 1053 | 130                                   | 1053 | 130 | Non-English specification |    | 1812   | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |  | 1804                     | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |  | 1805                     | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |        | 1251 | 110 | 2251 | 55 | Extension for reply within first month |  | 1252 | 420 | 2252 | 210 | Extension for reply within second month |  | 1253 | 950 | 2253 | 475 | Extension for reply within third month |  | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month |  | 1401 | 330 | 2401 | 165 | Notice of Appeal |  | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  |  | <b>SUBTOTAL (3) (\$)</b> 40.00 |
| Large Entity   |          | Small Entity             |                          | Fee Description  | Fee Paid                       |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Fee Code   | Fee (\$) | Fee Code                 | Fee (\$)                 |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1051   | 130      | 2051                     | 65                       | Surcharge - late filing fee or oath  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1052   | 50       | 2052                     | 25                       | Surcharge - late provisional filing fee or cover sheet                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1053   | 130      | 1053                     | 130                      | Non-English specification  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1812   | 2,520    | 1812                     | 2,520                    | For filing a request for <i>ex parte</i> reexamination                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1804   | 920*     | 1804                     | 920*                     | Requesting publication of SIR prior to Examiner action                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1805   | 1,840*   | 1805                     | 1,840*                   | Requesting publication of SIR after Examiner action                        |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1251   | 110      | 2251                     | 55                       | Extension for reply within first month                                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1252   | 420      | 2252                     | 210                      | Extension for reply within second month                                    |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1253   | 950      | 2253                     | 475                      | Extension for reply within third month                                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1254   | 1,480    | 2254                     | 740                      | Extension for reply within fourth month                                    |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1255   | 2,010    | 2255                     | 1,005                    | Extension for reply within fifth month                                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1401   | 330      | 2401                     | 165                      | Notice of Appeal   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1402   | 330      | 2402                     | 165                      | Filing a brief in support of an appeal                                     |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1403   | 290      | 2403                     | 145                      | Request for oral hearing   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1451   | 1,510    | 1451                     | 1,510                    | Petition to institute a public use proceeding                              |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1452   | 110      | 2452                     | 55                       | Petition to revive - unavoidable   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1453   | 1,330    | 2453                     | 665                      | Petition to revive - unintentional   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1501   | 1,330    | 2501                     | 665                      | Utility issue fee (or reissue)   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1502   | 480      | 2502                     | 240                      | Design issue fee   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1503   | 640      | 2503                     | 320                      | Plant issue fee  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1460   | 130      | 1460                     | 130                      | Petitions to the Commissioner  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1807   | 50       | 1807                     | 50                       | Processing fee under 37 CFR 1.17(q)  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1806   | 180      | 1806                     | 180                      | Submission of Information Disclosure Stmt                                  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 8021   | 40       | 8021                     | 40                       | Recording each patent assignment per property (times number of properties) | 40.00                          |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1809   | 770      | 2809                     | 385                      | Filing a submission after final rejection (37 CFR 1.129(a))                |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1810   | 770      | 2810                     | 385                      | For each additional invention to be examined (37CFR 1.129(b))              |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1801   | 770      | 2801                     | 385                      | Request for Continued Examination (RCE)                                    |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1802   | 900      | 1802                     | 900                      | Request for expedited examination of a design application                  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Other fee (specify) _____  |          |                          |                          |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| *Reduced by Basic Filing Fee Paid  |          |                          |                          |  | <b>SUBTOTAL (3) (\$)</b> 40.00 |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| <b>1. BASIC FILING FEE</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>770.00</td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (1) (\$)</b></td><td>770.00</td></tr></tbody></table>  |          |                          |                          | Large Entity   |                                | Small Entity |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1001 | 770  | 2001 | 385                    | Utility filing fee                  | 770.00 | 1002 | 340 | 2002                              | 170  | Design filing fee                                      |      | 1003 | 530                                   | 2003 | 265 | Plant filing fee          |    | 1004   | 770   | 2004 | 385   | Reissue filing fee                                     |  | 1005                     | 160  | 2005 | 80   | Provisional filing fee                                 |  | <b>SUBTOTAL (1) (\$)</b> |        |      |        |   | 770.00 |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Large Entity   |          | Small Entity             |                          | Fee Description  | Fee Paid                       |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Fee Code   | Fee (\$) | Fee Code                 | Fee (\$)                 |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1001   | 770      | 2001                     | 385                      | Utility filing fee   | 770.00                         |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1002   | 340      | 2002                     | 170                      | Design filing fee  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1003   | 530      | 2003                     | 265                      | Plant filing fee   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1004   | 770      | 2004                     | 385                      | Reissue filing fee   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1005   | 160      | 2005                     | 80                       | Provisional filing fee   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| <b>SUBTOTAL (1) (\$)</b>   |          |                          |                          |  | 770.00                         |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b> <div style="margin-top: 5px;"><div style="display: flex; justify-content: space-between;"><div>Total Claims</div><div>21</div><div>-20** =</div><div>1</div><div>x</div><div>18.00</div><div>=</div><div>18.00</div></div><div style="display: flex; justify-content: space-between;"><div>Independent Claims</div><div>3</div><div>-3** =</div><div></div><div>x</div><div></div><div>=</div><div>0.00</div></div><div style="display: flex; justify-content: space-between;"><div>Multiple Dependent</div><div></div><div>=</div><div></div></div></div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small; margin-top: 5px;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr><tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td></tr><tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td></tr><tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td></tr><tr><td colspan="4" style="text-align: right;"><b>SUBTOTAL (2) (\$)</b></td><td>18.00</td></tr></tbody></table> <p style="font-size: x-small; margin-top: 5px;">**or number previously paid, if greater; For Reissues, see above</p>  |          |                          |                          | Large Entity   |                                | Small Entity |  | Fee Description | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202     | 18   | 2202 | 9    | Claims in excess of 20 | 1201                                | 86     | 2201 | 43  | Independent claims in excess of 3 | 1203 | 290  | 2203 | 145  | Multiple dependent claim, if not paid | 1204 | 86  | 2204                      | 43 | ** Reissue independent claims over original patent | 1205  | 18   | 2205  | 9  | ** Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2) (\$)</b> |      |      |      | 18.00  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Large Entity   |          | Small Entity             |                          | Fee Description  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| Fee Code   | Fee (\$) | Fee Code                 | Fee (\$)                 |  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1202   | 18       | 2202                     | 9                        | Claims in excess of 20   |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1201   | 86       | 2201                     | 43                       | Independent claims in excess of 3  |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1203   | 290      | 2203                     | 145                      | Multiple dependent claim, if not paid                                      |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1204   | 86       | 2204                     | 43                       | ** Reissue independent claims over original patent                         |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
| 1205   | 18       | 2205                     | 9                        | ** Reissue claims in excess of 20 and over original patent                 |                                |              |  |                 |          |          |          |          |          |      |      |      |                        |                                     |        |      |     |                                   |      |  |      |      |                                       |      |     |                           |    |  |       |      |       |  |  |                          |      |      |      |  |  |                          |        |      |        |   |        |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |  |                                |
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